RELEVANT STATUTES

42 U.S.C. §1396a(a)(10)(E)(i) provides that a State Medicaid plan must provide

> "for making medical assistance available for medicare cost-sharing (as defined in section 1396d(p)(3) of this title) for qualified medicare beneficiaries described in section 1396d(p)(1) of this title."

42 U.S.C. §1396d(p)(3) provides in relevant part:

> "The term 'medicare cost-sharing' means the following costs incurred with respect to a qualified medicare beneficiary without regard to whether the costs incurred were for items and services for which medical assistance is otherwise available under the plan:
>
> (A)(i) premiums under section 1395i-2 or 1395i-2a of this title and
>
> (ii) premiums under section 1395r of this title,
>
> (B) Coinsurance under subchapter XVIII of this chapter (including coinsurance described in section 1395e of this title).
>
> (C) Deductibles established under subchapter XVIII of this chapter (including those described in section 1395e and section 1395l(b) of this title).
>
> (D) The difference between the amount that is paid under section 1395l(a) of this title and the amount that would be paid under such section if any reference to '80 percent' therein were deemed a reference to '100 percent'."